

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | NO. | DATE |
|---------------------------|----------|------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | sd | 555 | 10/18/01 |
| RESPONSE FORMALITY REVIEW | TA | 1113 | 1-16-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Claim | Date |
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Best Available Copy

If more than 150 claims or 10 actions
 staple additional sheet here

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589
 10/18/01
 617
 1-16-01